PARTICIPANT TYPE	Pregnant Women
High Risk	No

RISK DESCRIPTION:

Prenatal care beginning after the 1st trimester (after the 13th week) or having an inadequate number of prenatal visits as follows:

Weeks Gestation	Number of Prenatal Visits
14-21	0 or unknown
22-29	1 or less
30-31	2 or less
32-33	3 or less
34+	4 or less

Аѕк Авоит:

- Health insurance and barriers related to obtaining insurance such as legal status and problems finding a provider that accepts medical assistance
- Barriers getting to the provider's office for appointments such as child care, transportation, and lack of social support
- Attitudes and beliefs about the need for prenatal care including denial of an unplanned pregnancy
- Previous experiences with prenatal care

NUTRITION COUNSELING/EDUCATION TOPICS:

- Women who do not receive early and adequate prenatal care are more likely to deliver premature, growth-retarded or low birth weight infants.
- Describe the importance of prenatal appointments for monitoring weight gain and the baby's growth; and for screening for potential pregnancy complications such as high blood pressure and gestational diabetes.
- Review weight gain goal and current weight gain status.
- Review the basics of a healthy pregnancy diet using MyPyramid as the basis and make suggestions as needed.
- Encourage her to keep all prenatal appointments and to reschedule appointments when conflicts arise.

Possible Referrals:

• If she is not receiving prenatal care or is not keeping her appointments, refer her to primary care providers in the community, the Optimal Pregnancy Outcome Program (OPOP)

(http://www.ndhealth.gov/opop/), or the local public health department.